

AF 12853
#



PATENT APPLICATION

**RESPONSE UNDER 37 CFR §1.116
EXPEDITED PROCEDURE
TECHNOLOGY CENTER ART UNIT 2853**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE **RECEIVED**

In re the Application of

MAR 09 2004

Yoshiro SHIOKAWA et al.

Group Art Unit: 2853

Application No.: 09/870,736

Examiner: B. Mouttet

Filed: June 1, 2001

Docket No.: 109675

For: METHOD AND APPARATUS FOR ION ATTACHMENT MASS SPECTROMETRY

AMENDMENT AFTER FINAL REJECTION UNDER 37 CFR §1.116

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In reply to the October 30, 2003 Office Action, please consider the following:

Amendments to the Claims as reflected in the listing of claims; and

Remarks.

03/04/2004 MAHMED1 00000111 09870736

02 FC:1201

86.00 DP



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PATENT APPLICATION

Attorney Docket No.: 109675

AMENDMENT TRANSMITTAL

In re the Application of

Yoshiro SHIOKAWA et al.

Group Art Unit: 2853

Application No.: 09/870,736

Examiner: B. Mouttet

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Entitlement to small entity status is hereby asserted.
☐ Small entity status of this application has been established.

The filing fee has been calculated as shown below:

(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	OTHER THAN A SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	RATE	ADD'L FEE
TOTAL CLAIMS	*16 MINUS	**20	x 9	\$
INDEP CLAIMS	*5 MINUS	***4	x 43	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+ 145	\$
			\$	\$

- * If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- ☒ Check No. 151620 in the amount of \$86.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff
Registration No. 27,075

Julie M. Seaman
Registration No. 51,156

JAO:JMS/jcp

Date: March 1, 2004